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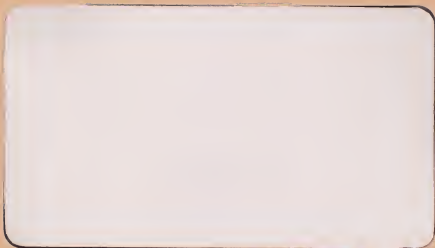
They are based on data from
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Office of Research and Demonstrations



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Research Brief No. 88-3
Medicare participating providers and suppliers
of health services: December 1987

**Medicare participating providers and suppliers
of health services: December 1987**

In this Research Brief, we present data on the number, type, and geographic distribution of health care facilities participating in the Medicare program. The data show the effects of Medicare legislation enacted in the early 1980's that authorized certification of new types of providers and that expanded benefits for the use of the older categories of providers and suppliers of services. The applicable legislation is summarized as follows:

- The Omnibus Reconciliation Act of 1980 (Public Law 96-499) authorized the reimbursement of covered services in certified comprehensive outpatient rehabilitation facilities and ambulatory surgical centers. This legislation substantially liberalized the use of home health agency (HHA) benefits by providing for the coverage of an unlimited number of visits, eliminating the deductible for HHA services furnished under Part B, and permitting proprietary HHA's to participate in States not having licensure laws.
- The Tax Equity and Fiscal Responsibility Act of 1982 (Public Law 97-248) authorized the reimbursement of covered services in facilities certified as hospice providers.
- The Social Security Amendments of 1983 (Public Law 98-21) provided for a prospective payment system (effective October 1, 1983) for most short-stay hospitals participating in Medicare. (Incentives inherent in prospective payment encouraged hospital providers to release patients from acute-care services as quickly as possible. Thus, the necessity for post-hospital care probably promoted the wider use of lower levels-of-care services and contributed to the growth of providers who furnish these services.)

The number and characteristics of providers and suppliers of services participating in the Medicare program as of December 31, 1987 are shown in this report. These statistics, derived from the provider of services master file, are updated on a monthly basis. Therefore, the data may differ from the Medicare provider statistics shown in other Health Care Financing Administration reports that are based on earlier or later processing dates.

In December 1987, for the United States and outlying areas, the number of participating health care facilities and suppliers was 29,221. Of these, 49 percent (13,879) were inpatient hospitals and skilled nursing facilities (6,708 and 7,379, respectively). An additional 37 percent of all facilities were HHA's (5,759) and independent laboratories (4,474). Other health care providers and suppliers of services accounted for the remaining 14 percent--outpatient physical therapy and speech pathology (1,029), portable X-ray (395), rural health clinics (458), comprehensive outpatient rehabilitation facilities (141), ambulatory surgical centers (851), end stage renal disease (ESRD) facilities (1,578), and hospices (449).

This Research Brief was prepared by Vikki Latta from the Division of Program Studies in the Office of Research. For additional information or for suggestions regarding future topics, contact Charles Helbing at (301) 966-7705 or FTS 646-7705.

Selected data highlights

Table 1 - Number and percent change of facilities participating in the Medicare program, by type of facility: Selected years, 1979-87

- From 1979 through 1987, the total number of Medicare participating facilities increased 46 percent, rising from 20,071 to 29,221, an addition of 9,150 facilities.
- Participating hospitals decreased 1.1 percent, from 6,780 facilities in 1979 to 6,708 in 1987 (Figure 1-A).
- Medicare participating skilled nursing facilities (SNF's) grew in number by 2,324 facilities from 1979 through 1987, rising from 5,055 to 7,379, or 46 percent.
- HHA's participating in Medicare increased 102 percent, from 2,858 in 1979 to 5,759 in 1987, adding 2,901 more agencies during these years.
- The number of participating independent laboratories rose 30 percent, from 3,448 in 1979 to 4,474 in 1987, an increase of 1,026 laboratories.
- During the same period, outpatient physical therapy and/or speech pathology facilities increased 167 percent, rising from 386 to 1,029, an increase of 643 facilities (Figure 1-B).
- The number of portable X-ray facilities almost doubled from 1979 through 1987, going from 210 to 395, an increase of 185 facilities, or 88 percent.
- ESRD facilities rose in number from 975 in 1979 to 1,578 in 1987, an increase of 603 facilities, or 62 percent.

Table 2 - Number and percent distribution of Medicare participating short-stay hospitals (SSH's) and type of ownership, by number of certified beds: All areas, December 1987

- Of the 5,850 SSH's participating in the Medicare program, 51 percent (2,975) were voluntary nonprofit institutions, 14 percent (832) were proprietary, and 35 percent (2,043) were government (non-Federal) operated.
- The average number of beds per SSH was 171. Voluntary hospitals had the largest mean number of beds (212), 66 percent greater than government hospitals (127).
- Nearly 50 percent (2,827) of all SSH's had less than 100 beds and 70 percent (4,087) had less than 200 beds.
- Only 338 SSH's (6 percent) had 500 or more beds: 70 percent (238) of these were operated by voluntary nonprofit organizations, whereas only 7 hospitals were privately owned.

Table 3 - Number and percent distribution of Medicare participating skilled nursing facilities (SNF's) and type of ownership, by number of certified beds: All areas, December 1987

- Of all SNF's (7,379) participating in the Medicare program, 22 percent (1,634) were owned by voluntary organizations, 66 percent (4,892) were proprietary, and 12 percent (853) were operated by the government.
- A full 81 percent (5,974) of all SNF's (7,379) had less than 100 certified beds; 12 percent (871) had from 100 to 149 beds, and the remaining 7 percent (534) had 150 beds or more.
- Government-operated SNF's had the highest mean number of beds (72).

Table 4 - Rate of Medicare short-stay hospital and skilled nursing facility beds to Medicare hospital insurance population, by census division: United States, December 1987

- For all divisions, there were 33.6 SSH beds and 15.3 SNF beds per 1,000 hospital insurance (HI) enrollees (Figures 2 and 3).
- For SSH beds per 1,000 HI enrollees, the rate (39.5) and ratio (1.18) were highest in the East South Central Division.
- In contrast, the Middle Atlantic Division had the highest rate (23.0) and ratio (1.50) of SNF beds per 1,000 HI enrollees. This same division had the lowest rate (27.4) and ratio (0.82) of SSH beds per 1,000 HI enrollees.
- The West South Central Division showed a comparatively high rate (39.2) and ratio (1.17) for SSH beds per 1,000 enrollees, but had the lowest rate (5.4) and ratio (0.35) for SNF beds per 1,000 enrollees.

Table 5 - Number and type of participating Medicare hospitals and number and rate of certified beds, by area of provider: December 1987

- In all areas--the United States and outlying areas--6,708 hospitals supplied 1,124,473 certified beds. Of these, 5,850 were SSH's supplying 997,528 beds. SSH's accounted for 87 percent of all hospitals and 89 percent of all beds.
- For every 1,000 enrollees in the United States, there were 34 SSH beds, ranging from a low of 28 beds in the Northeast Region to a high of 36 beds in the North Central and the South Regions. By State, the number of SSH beds per 1,000 enrollees ranged from 23 in Rhode Island to 83 in Alaska.
- Of all hospitals (6,708) participating in the Medicare program, 13 percent (858) were either psychiatric (585) or other long-stay hospitals (273).
- Certified beds in long-stay hospitals were heavily concentrated in the Northeast region; 20,575 beds--about 22 percent of all psychiatric hospital beds (94,372)--were located in New York. Of all other long-stay hospital beds (32,573), Massachusetts had 7,155 beds, accounting for another 22 percent.

Table 6 - Number of participating Medicare skilled nursing facilities, certified beds, and type of facility, by area of provider: December 1987

- There were substantial differences by State in the geographic distribution of providers and suppliers of service.
- Over two-fifths (2,964) of the 7,379 certified Medicare skilled nursing facilities were located in 5 States--California (1,035), New York (562), Pennsylvania (534), Ohio (453), and Florida (380).
- Among the 4 Census regions, the heaviest concentration of home health agencies (HHA's) was in the South, which accounted for 39 percent (2,272) of all participating HHA's (5,759); Texas (455) and Tennessee (327) accounted for 14 percent of all HHA's in the United States.
- Of the 1,029 providers of service certified to render physical therapy and/or speech pathology services, nearly one-third were located in 4 States--Florida (131), Pennsylvania (72), California (68), and Texas (47).
- One-fifth (882) of all independent laboratories (4,474) certified to participate in the Medicare program were located in California. Texas (302), New York (250), and Pennsylvania (275) accounted for another 18 percent.
- More than one-fifth (83) of all participating portable X-ray facilities (395) were located in California.
- Approximately 70 percent of all certified rural health clinics (458) were concentrated in the South (161) and West (153) regions.
- Approximately 45 percent (63) of all certified comprehensive outpatient rehabilitation facilities (141) were located in the South, with Florida accounting for 16 percent (22).
- Ambulatory surgical centers (ASC's) were heavily concentrated in the South (305) and West (316) regions, accounting for almost three-fourths of all participating ASC's in the United States and outlying areas (851). California (172) accounted for nearly one-fifth of all ASC's.
- The South region (716) contained more than two-fifths of all participating ESRD facilities (1,686).
- Over 6 percent (29) of all hospices (449) certified to participate in the Medicare program were located in Florida.

Table 1

Number and percent change of facilities participating in the Medicare program,
by type of facility: Selected years, 1979-87 1/

Type of facility	1979	1981	1983	1985	1987	Percent change 1979-87
Total	20,071	21,095	23,363	27,306	29,221	45.6
Hospitals	6,780	6,749	6,687	6,710	6,708	-1.1
Skilled nursing facilities	5,055	5,295	5,760	6,725	7,379	46.0
Home health agencies	2,858	3,169	4,235	5,932	5,759	101.5
Independent laboratories 2/	3,448	3,511	3,708	4,029	4,474	29.8
Outpatient physical therapy and/or speech pathology 3/	386	554	702	871	1,029	166.6
Portable X-ray 4/	210	234	266	329	395	88.1
End stage renal disease 5/	975	1,162	1,308	1,463	1,578	61.8
Rural health clinics 6/	359	421	423	423	458	27.6
Comprehensive outpatient rehabilitation 7/	---	---	43	86	141	---
Ambulatory surgical centers 8/	---	---	155	505	851	---
Hospice 9/	---	---	76	233	449	---

1/ Represents facilities participating in the Medicare program as of December of each year shown.

2/ Effective January 1967.

3/ Outpatient physical therapy effective January 1968, speech pathology effective January 1973.

4/ Effective July 1971.

5/ Effective July 1973.

6/ Effective March 1978.

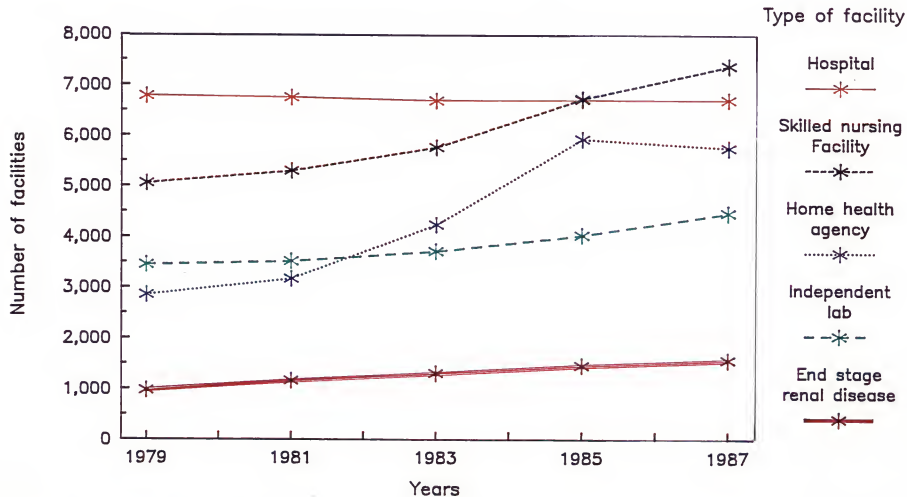
7/ Effective July 1981.

8/ Effective September 1982.

9/ Effective November 1983.

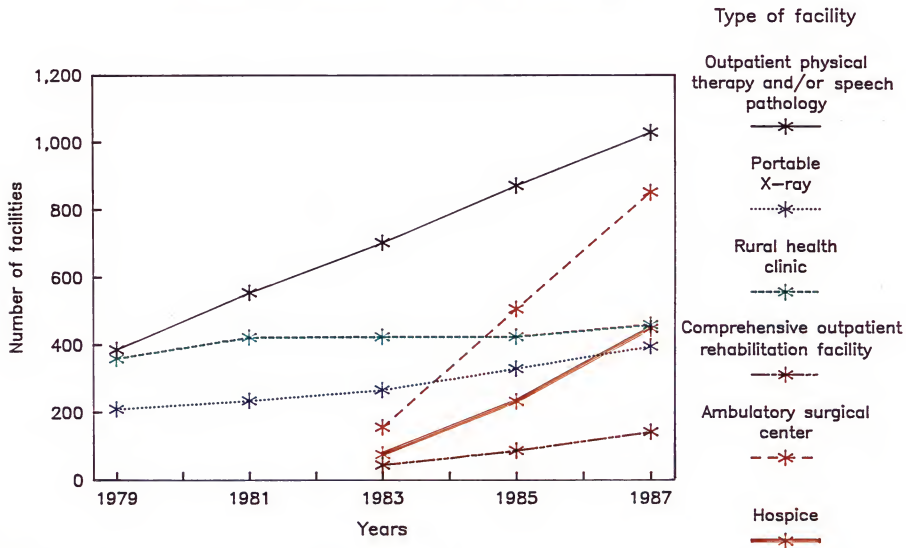
SOURCE: Health Care Financing Administration, Office of Research and Demonstrations:
Data from the Division of Program Studies.

Figure 1-A
 Number of facilities participating in the Medicare program,
 by type of facility: Selected years 1979-87



SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program studies.

Figure 1-B
Number of facilities participating in the Medicare program,
by type of facility: Selected years 1979-87



SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program studies.

Table 2

Number and percent distribution of Medicare participating short-stay hospitals and type of ownership,
by number of certified beds: All areas, December 1987

Number of certified beds	All short-stay hospitals		Voluntary		Proprietary		Government	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	5,850	100.0	2,975	100.0	832	100.0	2,043	100.0
Less than 100 beds	2,827	48.3	1,075	36.1	391	47.0	1,361	66.6
100-199 beds	1,260	21.5	663	22.3	282	33.9	315	15.4
200-299 beds	714	12.2	479	16.1	105	12.6	130	6.4
300-399 beds	441	7.5	323	10.9	33	4.0	85	4.2
400-499 beds	270	4.6	197	6.6	14	1.7	59	2.9
500 beds or more	338	5.8	238	8.0	7	0.8	93	4.6
Mean number of beds	171	----	212	----	129	----	127	----

SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program Studies.

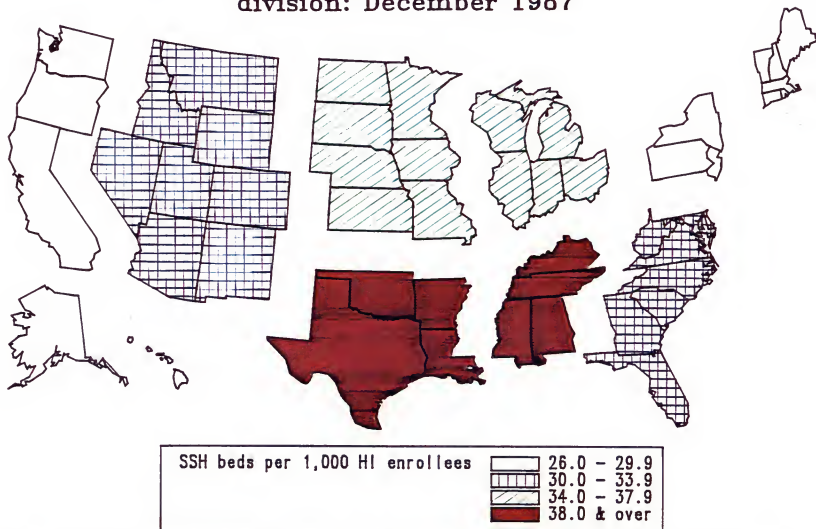
Table 3

Number and percent distribution of Medicare participating skilled nursing facilities and type of ownership,
by number of certified beds: All areas, December 1987

Number of certified beds	All skilled nursing facilities		Voluntary		Proprietary		Government	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	7,379	100.0	1,634	100.0	4,892	100.0	853	100.0
Less than 25 beds	2,299	31.2	453	27.7	1,620	33.1	226	26.5
25-49 beds	1,704	23.1	403	24.7	1,076	22.0	225	26.4
50-99 beds	1,971	26.7	433	26.5	1,310	26.8	228	26.7
100-149 beds	871	11.8	196	12.0	587	12.0	88	10.3
150-199 beds	285	3.9	73	4.5	174	3.6	38	4.5
200 beds or more	249	3.4	76	4.7	125	2.6	48	5.6
Mean number of beds	61	----	66	----	57	----	72	----

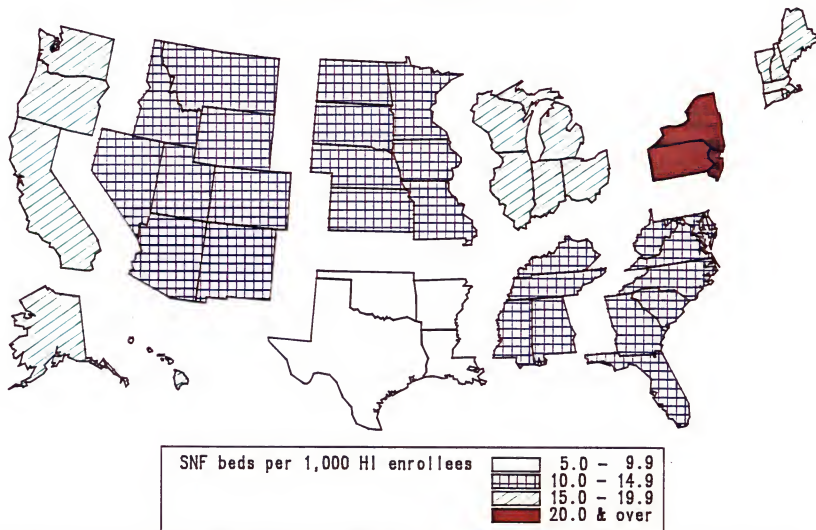
SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program Studies.

Figure 2
 Number of Medicare short-stay hospital (SSH) beds per 1,000
 hospital insurance (HI) enrollees, by U.S. census
 division: December 1987



SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program Studies.

Figure 3
Number of Medicare skilled nursing facility (SNF) beds per 1,000
hospital insurance (HI) enrollees, by U.S. census
division: December 1987



SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program Studies.

Table 4

Rate of Medicare short-stay hospital (SSH) and skilled nursing facility (SNF) beds to Medicare hospital insurance (HI) population, by census division: United States, December 1987 1/

Census division	SSH beds per 1,000 HI enrollees		SNF beds per 1,000 HI enrollees		Ratio of SSH beds to SNF beds
	Rate	Ratio 2/	Rate	Ratio 3/	
Total	33.6	1.00	15.3	1.00	2.2
New England	28.1	0.84	16.8	1.10	1.7
Middle Atlantic	27.4	0.82	23.0	1.50	1.2
East North Central	35.7	1.06	16.2	1.06	2.2
West North Central	36.8	1.10	12.2	0.80	3.0
South Atlantic	32.6	0.97	11.7	0.76	2.8
East South Central	39.5	1.18	10.1	0.66	3.9
West South Central	39.2	1.17	5.4	0.35	7.3
Mountain	31.7	0.94	10.0	0.65	3.2
Pacific	29.6	0.88	19.4	1.27	1.5

1/ Based on HI enrollment as of July 1987.

2/ Ratio of SSH beds per 1,000 HI enrollees in census division to the rate for the United States.

3/ Ratio of SNF beds per 1,000 HI enrollees in census division to the rate for the United States.

SOURCE: Health Care Financing Administrations, Office of Research and Demonstrations: Data from the Division of Program Studies.

Table 5

Number and type of participating Medicare hospitals and number and rate of certified beds,
by area of provider: December 1987

Area of provider	Short-stay								
	All hospitals		Beds per 1,000 enrollees			Psychiatric		Other long-stay	
	Number	Beds	Number	Beds		Number	Beds	Number	Beds
All areas	6,708	1,124,473	5,850	997,528	32.6	585	94,372	273	32,573
United States	6,645	1,113,193	5,788	986,698	33.6	584	93,922	273	32,573
Northeast	1,046	242,556	848	191,595	27.6	110	36,444	88	14,517
North Central	1,862	320,207	1,686	279,536	36.1	124	16,710	52	5,961
South	2,481	395,923	1,254	358,548	35.8	239	28,984	88	8,391
West	1,256	172,507	1,100	157,019	30.1	111	11,784	45	3,704
New England	324	63,635	248	48,258	28.1	33	5,104	43	9,273
Connecticut	52	14,982	36	11,379	26.4	9	2,605	7	998
Maine	49	5,135	45	4,523	27.0	3	587	1	25
Massachusetts	154	32,697	109	24,604	30.3	13	938	32	7,155
New Hampshire	33	3,813	28	3,243	26.3	4	468	1	102
Rhode Island	19	4,794	14	3,444	23.4	3	357	2	993
Vermont	17	2,214	16	2,065	30.1	1	149	0	0
Middle Atlantic	722	178,921	600	142,337	27.4	77	31,340	45	5,244
New Jersey	122	34,429	99	29,837	29.5	12	3,641	11	951
New York	318	92,373	271	69,635	29.3	35	20,575	12	2,163
Pennsylvania	282	52,119	230	42,865	23.8	30	7,124	22	2,130
East North Central	994	203,174	878	188,633	35.7	81	10,112	35	4,429
Illinois	253	57,932	232	55,126	38.8	14	2,110	7	696
Indiana	145	27,419	118	25,495	36.8	24	1,776	3	148
Michigan	206	37,508	193	35,829	32.0	8	1,029	5	650
Ohio	224	57,088	191	51,066	36.8	20	3,583	13	2,439
Wisconsin	166	23,227	144	21,117	32.0	15	1,614	7	496
West North Central	868	99,033	808	90,903	36.8	43	6,598	17	1,532
Iowa	134	15,266	130	14,223	32.9	4	1,043	0	0
Kansas	154	14,208	143	13,012	38.3	11	1,196	0	0
Minnesota	179	22,218	170	20,064	36.8	6	1,910	3	244
Missouri	169	29,825	145	27,361	37.5	15	1,508	9	956
Nebraska	106	8,763	98	7,864	34.8	5	616	3	193
North Dakota	57	4,559	55	4,191	45.5	1	280	1	88
South Dakota	69	4,284	67	4,188	40.8	1	45	1	51

Table 5-Continued

Number and type of participating Medicare hospitals and number and rate of certified beds,
by area of provider: December 1987

Area of provider	Short-stay									
	All hospitals						Psychiatric		Other long-stay	
	Number	Beds	Number	Beds	Beds per 1,000 enrollees		Number	Beds	Number	Beds
South Atlantic	1,010	192,708	847	171,432	32.6		112	16,627	51	4,649
Delaware	10	2,314	7	2,150	28.3		2	104	1	60
Dist. of Columbia	15	5,551	11	4,469	60.7		2	719	2	363
Florida	276	58,683	227	54,844	27.9		30	2,599	19	1,240
Georgia	198	29,299	171	26,021	40.8		24	3,016	3	262
Maryland	74	18,590	57	14,382	30.6		10	3,209	7	999
North Carolina	156	28,634	132	24,278	31.9		17	3,940	7	416
South Carolina	84	14,119	73	12,529	33.7		10	1,384	1	206
Virginia	128	24,776	103	22,163	35.6		16	1,576	9	1,037
West Virginia	69	10,742	66	10,596	37.1		1	80	2	66
East South Central	539	82,206	490	77,146	39.2		34	3,640	15	1,420
Alabama	138	21,539	126	20,388	39.1		7	601	5	550
Kentucky	118	18,550	105	16,707	34.6		10	1,628	3	215
Mississippi	123	13,773	116	13,335	40.0		5	299	2	139
Tennessee	160	28,344	143	26,716	43.3		12	1,112	5	516
West South Central	932	121,009	817	109,970	39.2		93	8,719	22	2,322
Arkansas	103	11,932	91	10,948	30.3		7	469	5	515
Louisiana	175	26,671	150	23,197	49.6		23	3,296	2	178
Oklahoma	146	16,661	131	15,303	37.1		13	1,146	2	212
Texas	508	65,745	445	60,522	38.6		50	3,806	13	1,417
Mountain	470	48,490	401	42,757	31.7		52	4,760	17	973
Arizona	83	11,890	71	11,077	27.5		10	771	2	42
Colorado	94	13,259	80	10,939	36.6		8	1,680	6	640
Idaho	54	3,246	45	2,867	24.6		7	307	2	72
Montana	66	3,424	63	3,314	31.7		3	110	0	0
Nevada	32	3,828	27	3,503	35.5		4	291	1	34
New Mexico	58	5,541	47	4,901	33.4		8	533	3	107
Utah	52	5,334	41	4,375	32.4		9	903	2	56
Wyoming	31	1,968	27	1,781	39.8		3	165	1	22
Pacific	786	124,017	699	114,262	29.6		59	7,024	28	2,731
Alaska	24	1,698	22	1,444	82.6		2	254	0	0
California	546	94,333	481	87,574	30.8		48	4,716	17	2,043
Hawaii	24	2,579	21	2,365	23.8		1	88	2	126
Oregon	80	9,642	73	9,137	24.6		4	425	3	80
Washington	112	15,765	102	13,742	25.9		4	1,541	6	482
Outlying areas	63	11,280	62	10,830	27.0		1	450	0	0
Puerto Rico	59	10,561	58	10,111	25.9		1	450	0	0
Virgin Islands	2	500	2	500	84.7		0	0	0	0
Other	2	219	2	219	59.6		0	0	0	0

SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program Studies.

Table 6

Number of participating Medicare skilled nursing facilities, certified beds, and type of facility, by area of provider: December 1987

Area of provider	Skilled nursing facilities		Home health agencies	Outpatient PT/SP	Independent laboratories	Portable X-ray	Rural health clinics	Comprehensive outpatient rehabilitation facilities	Ambulatory surgical centers	End stage renal disease	Hospice
	Number	Beds									
All areas	7,379	449,867	5,759	1,029	4,474	395	458	141	851	1,686	449
United States	7,373	449,502	5,715	1,028	4,364	395	458	141	841	1,665	448
Northeast	1,706	148,785	839	150	983	94	86	37	82	294	93
North Central	2,148	115,678	1,738	235	787	87	58	18	138	315	111
South	1,834	96,547	2,272	486	1,326	101	161	63	305	716	151
West	1,685	88,582	866	157	1,268	113	153	23	316	340	93
New England	436	29,743	337	31	346	27	34	11	33	61	29
Connecticut	179	18,796	106	13	93	10	0	5	13	17	3
Maine	17	455	19	5	8	4	24	0	3	5	0
Massachusetts	138	7,158	144	9	184	9	0	2	10	28	16
New Hampshire	19	413	38	2	15	1	2	3	5	4	0
Rhode Island	67	2,089	13	1	43	3	3	1	2	6	5
Vermont	16	562	17	1	3	0	5	0	0	1	5
Middle Atlantic	1,270	119,362	502	119	637	67	52	26	49	233	64
New Jersey	174	14,581	61	26	112	15	0	2	19	28	21
New York	562	76,728	170	21	250	32	24	6	9	109	19
Pennsylvania	534	28,003	271	72	275	20	28	18	21	96	24
East North Central	1,456	85,590	972	146	553	65	20	12	88	208	73
Illinois	327	7,337	260	40	175	17	1	7	23	74	12
Indiana	222	9,435	136	19	70	9	0	1	19	29	4
Michigan	300	23,250	174	30	131	9	0	0	14	38	23
Ohio	453	40,145	243	40	141	20	16	4	24	43	22
Wisconsin	154	5,423	159	17	36	10	3	0	8	24	12
West North Central	692	30,088	766	89	234	22	38	6	50	107	38
Iowa	44	1,008	156	24	24	3	12	0	4	14	9
Kansas	55	1,278	131	15	46	1	1	0	10	13	3
Minnesota	333	17,815	196	24	28	4	3	2	10	19	12
Missouri	159	4,943	186	22	92	10	0	4	16	40	9
Nebraska	30	1,306	41	3	19	4	0	0	2	8	2
North Dakota	59	3,491	34	1	16	0	0	0	4	5	2
South Dakota	12	247	22	0	9	0	22	0	4	8	1

Table 6-Continued

Number of participating Medicare skilled nursing facilities, certified beds, and type of facility, by area of provider: December 1987

Area of provider	Skilled nursing facilities		Home health agencies	Outpatient PT/SP	Independent laboratories	Portable X-ray	Rural health clinics	Comprehensive outpatient rehabilitation facilities	Ambulatory surgical centers	End stage renal disease	Hospice
	Number	Beds									
South Atlantic	1,059	61,683	752	332	586	50	115	39	137	349	85
Delaware	26	1,849	19	6	16	0	0	1	0	4	4
Dist. of Columbia	7	474	10	0	12	0	0	0	1	16	2
Florida	380	18,488	192	131	226	27	16	22	56	104	29
Georgia	100	6,059	71	81	65	1	23	7	81	56	16
Maryland	117	10,854	85	32	101	7	1	5	24	38	7
North Carolina	195	10,051	122	18	52	7	39	1	25	35	19
South Carolina	109	8,506	44	35	21	2	2	1	7	34	1
Virginia	83	2,137	157	44	43	3	1	2	7	48	4
West Virginia	42	3,265	52	1	34	3	33	0	6	14	3
East South Central	403	19,724	657	48	266	13	46	15	54	130	29
Alabama	193	10,667	117	6	73	2	4	4	16	35	8
Kentucky	97	3,708	101	13	77	5	8	1	17	19	8
Mississippi	8	347	112	6	37	2	8	5	7	23	4
Tennessee	105	5,002	327	23	79	4	26	5	14	53	9
West South Central	372	15,140	863	106	474	38	0	9	114	237	37
Arkansas	42	1,270	160	16	42	3	0	2	10	24	5
Louisiana	59	4,680	162	26	76	12	0	1	24	61	11
Oklahoma	22	410	86	17	54	3	0	0	12	27	4
Texas	249	8,780	455	47	302	20	0	6	68	125	17
Mountain	421	13,445	366	60	223	15	64	5	102	91	43
Arizona	74	1,301	59	12	59	4	8	1	55	32	4
Colorado	100	2,889	106	21	55	4	12	1	11	14	19
Idaho	64	2,664	30	7	19	1	1	19	8	6	8
Montana	78	2,837	3	3	11	0	0	0	9	4	2
Nevada	24	2,272	18	1	22	3	6	1	9	4	1
New Mexico	18	439	49	16	26	1	22	0	3	17	9
Utah	52	838	35	0	21	2	8	0	6	13	0
Wyoming	11	205	27	0	10	0	1	1	1	1	0
Pacific	1,264	75,137	500	97	1,045	98	89	18	214	249	50
Alaska	6	180	7	1	7	1	18	1	3	2	0
California	1,035	69,523	355	68	882	83	48	12	172	208	30
Hawaii	26	1,773	17	1	27	1	0	1	6	10	3
Oregon	67	1,219	60	8	49	3	11	2	7	10	4
Washington	130	2,442	60	13	80	10	12	2	26	19	13
Outlying areas	6	275	44	1	110	0	0	0	10	21	1
Puerto Rico	5	239	42	1	105	0	0	0	10	15	1
Virgin Islands	0	0	1	0	0	0	0	0	1	2	0
Other	1	36	1	0	5	0	0	0	0	4	0

NOTE: PT is physical therapy. SP is speech pathology.

SOURCE: Health Care Financing Administration, Office of Research and Demonstrations: Data from the Division of Program Studies.

Definition of terms

Ambulatory surgical center: Provides certain surgical services on an outpatient basis and was authorized under the Omnibus Reconciliation Act (ORA) of 1980.

Beds: The number of certified Medicare beds that are regularly available (those set up and staffed for use).

Comprehensive outpatient rehabilitation facility: Provides a wider range of rehabilitative services in a central facility than those currently available in outpatient rehabilitation facilities, and is authorized under ORA of 1980.

Home health agency: An agency providing intermittent skilled nursing and other therapeutic services in the residence of the patient.

Hospice: A public agency or private organization that is primarily engaged in providing pain relief, symptom management, and support services to terminally ill people and their families (Your Medicare Handbook, 1987, page 11). Hospices are authorized in the Tax Equity and Fiscal Responsibility Act of 1982 to provide hospice care for terminally ill beneficiaries with a life expectancy of 6 months or less.

Hospital: An institution that provides diagnostic and therapeutic services for the medical treatment of injury, disability, or disease, by or under the supervision of physicians.

Independent laboratory: A laboratory that performs diagnostic tests independent of a physician's office or a hospital that participates in the Medicare program.

Long-stay hospital: A hospital where persons are treated for conditions that require treatment of longer duration, with an average length of stay of 25 days or longer.

Outpatient physical therapy and/or speech pathology: Services furnished by a provider of services, a clinic, a rehabilitation agency, or a public health agency on an outpatient basis.

Portable X-ray: An individual, partnership, or organization preparing radiographs with portable equipment, usually in the patient's place of residence, under the general supervision of a physician.

Psychiatric hospital: An institution primarily engaged in providing psychiatric services for the diagnosis and treatment of mental illness, by or under the supervision of a physician.

Rural health clinic: A facility established to provide primary care services furnished by specially trained nonphysician practitioners to patients residing in areas that are recognized as having a shortage of personal health care services or primary medical care manpower.

Short-stay hospital: A hospital established primarily for medical treatment of persons with acute illness with a stay of less than 25 days.

Skilled nursing facility: An institution primarily engaged in providing skilled nursing care and related services for patients who require nursing or rehabilitation services.

Sources of data

The provider data were obtained from the Medicare/Medicaid Automated Certification System (MMACS). MMACS contains data from application forms of providers desiring to participate in the Medicare and/or Medicaid program and certification and transmittal forms completed by State agencies and the Health Care Financing Administration regional offices. These data are compiled to obtain a Provider of Services (POS) master file. The data from the POS master file were used to produce the tables presented in this report. This report was based on data recorded as of December 1987.

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Research Brief releases

The following Health Care Financing Research Briefs are available on request from the Office of Research and Demonstrations, Office of Research, Division of Program Studies, Medicare Program Studies Branch:

- No. 85 - 1 Medicare: Inpatient Use of Short-Stay Hospitals, 1983.
- No. 85 - 2 Hospital Outpatient Services Under Medicare: Trends and Demographic Variations, 1983.
- No. 85 - 3 Medicare: Use and Charges for Inpatient Services in Short-Stay Hospitals, by Diagnosis-Related Groups, Calendar Years 1981 and 1984.
- No. 85 - 4 Medicare: Surgical Procedures in Short-Stay Hospitals, by Census Region, 1983.
- No. 86 - 1 Medicare: Use and Cost of Home Health Agency Services, 1983.
- No. 86 - 2 Medicare: Participating Providers and Suppliers of Health Services, December 1985.
- No. 86 - 3 Raising the Age of Eligibility for Medicare to Age 67.
- No. 86 - 4 Medicare: Use of Skilled Nursing Facilities, 1984.
- No. 87 - 1 Medicare: Inpatient Use of Short-Stay Hospital Services by Beneficiaries With a Diagnosis of Diabetes Mellitus, 1984.
- No. 87 - 2 Medicare: Use of Specialty Hospitals, 1985.
- No. 87 - 3 Medicare: Deductible and Coinsurance Amounts Incurred by Beneficiaries Discharged from Short-Stay Hospitals, 1983-84.
- No. 87 - 4 Medicare: Use and Cost of Hospital Outpatient Services, 1985.
- No. 87 - 5 Medicaid: Use and Cost of Services, Fiscal Year 1985.
- No. 88 - 1 Use and Cost of Short-Stay Hospital Inpatient Services, Under Medicare: Calendar Year 1985.
- No. 88 - 2 Use and Cost of Short-Stay Hospital Services Under Medicare as Related to Future Policy and Benefit Reform: Calendar Year 1985.

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